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February 16, 2005

WRITER'S DIRECT NUMBER: (202) 772-8835 **INTERNET ADDRESS:** TFIALA@SKGF.COM

Art Unit 2124

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Re:

U.S. Utility Patent Application

Appl. No. 10/645,902; Filed: August 22, 2003

Registry Emulation Inventors: Our Ref:

ROMM et al. 2193.0020002

Sir:

Transmitted herewith for appropriate action are the following documents:

- 1. PTO Fee Transmittal Form (PTO/SB/17);
- 2. Petition for Extension of Time Under 37 C.F.R. § 1.136(a);
- Amendment and Reply Under 37 C.F.R. § 1.111; 3.
- 4. Information Disclosure Statement;
- 5. A listing of the cited documents on Form PTO-1449 (9 pages);
- 6. Submission of Drawings;
- 7. Six (6) sheets of Replacement Drawings (Figs. 1, 2A-2C, 3, 4);
- 8. One (1) return postcard;
- 9. Credit Card Payment Form (PTO-2038) in the amount of \$4,450.00 to cover:

\$_180.00 \ Submission of Information Disclosure Statement Fee;

\$1,020.00 Petition for Extension of Time Fee;

\$1,650.00 Additional Claims Fee; and

\$1,600.00 Additional Independent Claims Fee.

Sterne, Kessler, Goldstein & Fox PLLC.: 1100 New York Avenue, NW: Washington, DC 20005: 202.371.2600 f 202.371.2540: www.skgf.com

Commissioner for Patents February 16, 2005 Page 2

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier. In the event that extensions of time are necessary to prevent abandonment of this patent application, then such extensions of time are hereby petitioned.

The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

Thomas C. Fiala

Attorney for Applicants Registration No. 43,610

TCF/BWL:apg Enclosures

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	40	05		D'S Patent	and Tradema	rk Office: U.S. DE	PARTMENT OF COMMERCE			
Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete If Known										
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Application Number 10/645,902						
				Filing Date		August 22, 2003				
				First Named Inv		non ROMM				
For FY 2005				Examiner Name		Chavis, John Q.				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2124				
TOTAL AMOUNT OF PAY	MENT (\$) 4,450.00)	Attorney Docke		3.0020002				
METHOD OF PAYMEN	T (check a	all that apply)								
Check X Credit Card Money Order None Other (please identify):										
X Deposit Account Deposit Account Number: 19-0036 Deposit Account Name: Sterne, Kessler, Goldstein & Fox P.L.L.C.										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s)										
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card										
information and authorization	on PTO-20	38.								
FEE CALCULATION										
1. BASIC FILING, SEAI		RCH FEES EXAMINATION FEES								
A 19 19		FEES Small Entity		Small Entity		Small Entity	Fees Paid (\$)			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	rees Palu (#)			
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional 2. EXCESS CLAIM FEE	200	100	0	0	0	0	Constitution			
Fee Description	:3						Small Entity Fee (\$) Fee (\$)			
Each claim over 20 or, for							50 25			
Each independent claim		for Reissues, eac	h indepen	dent claim m	ore than in	the original pa				
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Total Claims 53 - 20 or HP	Extra Clai = 33	ms <u>Fee (\$)</u> × <u>50.00</u>	Fee Pa = 1650		Fee (\$)	ependent Clai Fee F	Paid (\$)			
HP = highest number of total	claims paid t	for, if greater than 20								
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4. OTHER FEE(S)

- 100 =

Non-English Specification, \$130 fee (no small entity discount)

Other: Submission of Information Disclosure Statement and Petition for Extension of Time

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SUBMITTED BY		\sim				
Signature	Thom	1-FZ	Registration No. (Attorney/Agent)	43,610	Telephone	(202) 371-2600
Name (Print/Type	Thomas C. Fial:				Date F	ebruary 16, 2005

_____ (round **up** to a whole number) x

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Fees Paid (\$)

1,200.00